

# EXHIBIT N

**Booking Observation Report**  
**Allegheny County Jail**  
 Today's Date: 03/29/2016

**Inmate Information****Name:** ORLANDO, JOHN**Sex:** M **Race:** W**DOB:** [REDACTED]**DOC#:** 69335**Booking#:** 2016-03627**SID#:** 23706253**FBM#:** 206326253**Social Security#:** [REDACTED]**INS#:****Booking Observation Questions****Answers are Y = Yes, N or Blank = No, R = Refused to Answer**

<b>Order</b>	<b>Question</b>	<b>Y/N/R</b>
1	DO YOU HAVE A SERIOUS MEDICAL CONDITION THAT MAY REQUIRE ATTENTION WHILE YOU ARE HERE	Y
2	ARE YOU CURRENTLY TAKING A PRESCRIPTION MEDICATION THAT MAY NEED CONTINUATION WHILE YOU ARE HERE	N
3	DO YOU HAVE A SERIOUS MENTAL HEALTH CONDITION THAT MAY REQUIRE ATTENTION WHILE YOU ARE HERE	Y
4	ARE YOU CURRENTLY HAVING SUICIDAL THOUGHTS	N
5	HAVE YOU EVER ATTEMPTED SUICIDE	Y
6	HAVE YOU RECENTLY INGESTED POTENTIALLY DANGEROUS LEVELS OF DRUGS AND/ OR ALCOHOL	N
7	HAVE YOU EVER HAD A CLOSED HEAD INJURY THAT RESULTED IN A PERMANENT DISABILITY	N
8	HAVE YOU EVER EXPERIENCED SERIOUS WITHDRAWAL SYMPTOMS FROM ALCOHOL OR DRUGS	Y
9	HAVE YOU RECENTLY TAKEN OR BEEN PRESCRIBED MEDICATION FOR EMOTIONAL PROBLEMS	Y
10	HAVE YOU BEEN HOSPITALIZED FOR EMOTIONAL PROBLEMS WITHIN THE LAST YEAR	Y
11	DO YOU HAVE A DISABILITY THAT WILL IMPACT YOUR ABILITY TO UNDERSTAND INSTRUCTIONS	N
12	DO YOU UNDERSTAND THAT YOU MAY REQUEST HEALTHCARE SERVICES AT ANY TIME WHILE YOU ARE HERE	Y
13	IS THIS YOUR FIRST INCARCERATION	N
14	ARE YOU AWARE OF ANY REASON YOU SHOULD BE SEPARATED FROM ANOTHER INMATE WHILE YOU ARE HERE	N
15	HAVE YOU EVER REQUIRED SEPARATION FROM ANOTHER INMATE WHILE INCARCERATED IN ANOTHER FACILITY	N
16	ARE YOU CONCERNED THAT YOU WILL BE PHYSICALLY OR SEXUALLY ASSAULTED DURING YOUR STAY IN THIS JAIL	N
17	HAVE YOU EVER BEEN A VICTIM OF SEXUAL ASSAULT BY AN INMATE	N
18	HAVE YOU EVER BEEN SEXUALLY ASSAULTED	Y
19	HAVE YOU EVER SEXUALLY ASSAULTED ANOTHER PERSON	Y
20	ARE YOU A VETERAN OF THE ARMED FORCES	N
21	HAVE YOU PROVIDED US WITH ALL THE INFORMATION THAT YOU WANT US TO BE AWARE OF WHILE YOU ARE HERE	Y
22	HAVE YOU UNDERSTOOD ALL OF THE QUESTIONS ASKED OF YOU	Y
23	DOES THE BOOKING OFFICER FEEL THAT THE ARRESTEE IS CAPABLE OF UNDERSTANDING ALL THE QUESTIONS ASKED	Y
24	DOES THE PERSON HAVE ANY COMMUNICATON BARRIES	N
25	DOES THE PERSON HAVE ANY INSTITUTIONAL HISTORY OF ALERTS	N
26	DOES THE BOOKING OFFICER FEEL THAT THE ARRESTEE SHOULD BE REFERRED TO A SUPERVISOR FOR REVIEW	N

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27	IS THERE ANY INDICATION THAT THE PERSON MAY ENGAGE IN SELF HARMING BEHAVIOR	N
28	ANY INDICATIONS THAT COULD PLACE PERSON AT RISK OF BEING SEXUALLY ASSAULTED DURING THEIR STAY	N

By my signature, I agree that the above is true to the best of my knowledge.

\_\_\_\_\_  
Officer Signature

\_\_\_\_\_  
Medical Personnel Signature

\_\_\_\_\_  
Intake Staff